

Media communication and youth reproductive health, North Toraja District[☆]



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ABSTRACT

Objective: The diversity of communication media and in the era of globalization has provided information about reproductive health for adolescents as future generations. The long-term objective is to analyze communication media and reproductive health and reproductive health in areas of North Toraja society. The method used is Quantitative-Descriptive.

Method: The research method applied by researchers because it has objectives that need to be tested in terms of outcomes and processes. Data collection methods through observation, interviews and questionnaires. Furthermore, the collected data were analyzed using quality as a result of generalization.

Result: The results showed that the printed communication media of books and magazines as a source of preference to obtain reproductive health information.

Conclusion: This is based on the calculation which is equal to 57.39% and then the Website is 27.83% and the last is social media at 14.78%.

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Introduction

The younger generation often does not think about the impact of these technological advances, which can lead to problems such as premarital pregnancy, dropouts, and high HIV/AIDS. In the case of this free sex behavior, in fact the younger generation in Indonesia has been gnawed. The high rate of free sex behavior has an impact on the increasing number of people with HIV/AIDS.¹

In 2015, aids cases totalled 68,917 cases. Based on the age group, the percentage of AIDS cases in 2015 was highest at 20–29 years old (32%), 30–39 years old (29.4%), 40–49 years old (11.8%), 50–59 years old (3.9%) then 15–19 years old (3%) (Ministry of Health, 2015). The cause of high rates of HIV/AIDS and other reproductive health problems is a lack of understanding of reproductive health itself. On the other hand, the information that triggers to perform high-risk behaviors.

Other data show that high rates of early marriage, cases of out-of-wedlock pregnancy, abortion rates, and people infected with HIV/AIDS point to an alarming fact, especially the reality experienced by young people as a generation of nations. Youth is an important time in the course of life. This period requires greater social responsibility to lead to adulthood and maturity. Ideally, teenagers become a proud generation, really enjoying the whole journey of adolescence with fun. Youth learn with all things earnestly to develop all the potential they have.² This is evidenced by the teenager's low understanding of the important role reproductive health plays in his life, thus impacting a variety of deviant

behaviors that harm themselves and his future. Therefore, providing an understanding of reproductive health for adolescents is absolutely necessary, so that adolescents are able to have the awareness to maintain and avoid deeper acts of sexual violence.

Communication media and online media in the era of globalization open access to information allows everyone to access a wide range of information, including those that present sexual scenes implicitly. Existing media, both conventional media and online media, often present messages that are too early or not worth consuming for children and adolescents. Another thing that is trending today is the existence of social networks that are widely known in society. These social networks, in addition to bringing positive benefits, also have a negative impact on teenagers. The positive benefits in addition to tightening the ropes can also get a variety of information, while the negative impact is that it can interfere with privacy and be addictive. This condition makes reproductive health information very important to know, as a bulwark for the younger generation to be unaffected by the various information that triggers risky behaviors. Currently, various media have provided information about reproductive health for the younger generation, because the highest rate of HIV/AIDS suppressors is in the age of 20–29 years which means risky behaviors have been carried out since adolescence that is before the age of 20 years.

In the North Toraja region is a region that has many young women with a variety of media outlets who have their own problems, for example, free sex behavior among them. One way to overcome this is to convey various information about reproductive health that young women need in North Toraja regency. In addition, it should be understood that the media used by them to access information about reproductive health varies. Therefore, it is important to know what media is often used and trends among these teenagers, in order to be able to convey information about reproductive health through the right media.

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Communication and Reproductive Health Media

Appropriately, each individual pays attention to health factors as a primary need in his or her life. This is what requires people to look for the kinds of health information they need. In the past, our ancestors were able to survive without any information from the media. Traditional and natural ways are also the main choice to support the health factors of family members. However, this phenomenon is not necessarily the case in the present era.

The reality that is happening today shows the development of information that is spreading rapidly into the public domain. The advent of online Internet technology that allows humans to connect virtually has spawned virtual communities. Human identity also appears in a variety of virtual identities that are considered more able to express themselves in communicating with other virtual partners. Those involved in communication mediated by the internet media are not only dominated by young people, but people who were not familiar with information technology then often they are required to change themselves to adjust to the increasing spread and expansion of this technology.

In the study of Computer Mediated Communication (CMC) there is an important concept that is social presence which is a state where the electronic medium mimics the social cues present in the life of face-to-face interaction. E-mails that are only printed words can be said to have a low social presence, which theoretically makes them only suitable for regular exchange of information. Two-way communication through video conferences has a high social presence as they carry important social cues in voice intonation and facial expressions and a two-way direct interaction flow.³

The development of information technology is also not only able to create a global society, but materially able to develop a new life motion space for people so that unwittingly, the human community has lived in two worlds of life, namely real people's life and virtual social life.⁴ Therefore, it also needs to optimize the role of public health services in providing a better information on these particular issues Arsyad et al. with community-based approach.^{5,6} As in real society, cyber society is built through the social interaction of fellow members of the virtual community. Social contacts that occur among members of the virtual community have a broad meaning in their communication with each other, so from there they build meaning in their intersubjective world about the world it occupies

According to the WHO, reproductive health is a state of complete physical, mental and social welfare not only free from disease or disability in all aspects related to the reproductive system, its functions and processes. Reproductive health according to the WHO (World Health Organization) is an intact physical, mental and social condition, not only free from disease or disability in all aspects related to the reproductive system, its functions and processes.⁷ It means that reproductive health is a whole healthy state covering physical, mental and social life related to tools, functions and reproductive processes that think reproductive health is not a condition free of disease but rather how a person can have a safe and fulfilling sexual life before and after marriage. Broadly, the scope of reproductive health.

1. Infant and child health.
2. Prevention and prevention of reproductive tract infections, including PMSHIV/AIDS.
3. Prevention and prevention of abortion complications.
4. Adolescent reproductive health.
5. Prevention and treatment of infertility.
6. Cancer in old age and osteoporosis.
7. Various other aspects of reproductive health, such as cervical cancer, genital mutilation, fistula, and others.

Table 1
Adolescent age group level frequency distribution.

No.	Age group	Frequency	Percentage (%)
1	17–20 years	65	56.52
2	21–24 years	32	27.83
3	Above 24 years	18	15.65
	Total	115	100

Government programs to provide reproductive health services to young women have also been targeted. "If you can't talk about sexuality with teenagers, then anyone can't direct their needs". The trappings of adolescents in unsafe sexual behavior among others are seen from the low understanding of adolescents about sexually transmitted diseases, especially HIV and AIDS. As a result, their risk of contracting and transmitting HIV is great. Data on the number of teenagers and youth.⁸

Method

This method uses a descriptive quantitative approach. Research methods are an overview of procedures, techniques and procedures used to approach the root of the problem, seek answers to research problems and achieve the goals of this research. The study subjects were individuals/adolescents (ages 14–22) acting as members in a reproductive health communication behavior in North Toraja Regency of South Sulawesi. The research was conducted in North Toraja area of South Sulawesi. Collection techniques are performed through questionnaires, interviews and observes.

Results and Discussion

Reproductive health is a prosperous condition both physically, mentally, socially intact in everything related to function, the role of the reproductive system of both men and women. Reproductive health knowledge should be done since adolescence, because one will be able to recognize abnormalities in his reproductive health as early as possible, especially about menstruation and changes to his body.

The identity of the youth in North Toraja is expected in the future to be able to continue the relay staff of the nation's leadership for the better. In preparing the younger generation is also very dependent on the readiness of the community, namely with the existence of its culture. This includes the importance of providing filters on negative behaviors, among others; alcohol, taking illicit drugs, free sex, and others that can lead to diseases of HIV (Human Immunodeficiency Virus) and AIDS (Acquired Immune Deficiency Syndrome).

Besides its fairly complex population. North Toraja youth is a transition period from childhood to adulthood. When viewed in terms of biological and sexual maturity, adolescents are showing secondary sex characteristics until they reach sexual maturity. Meanwhile, when viewed in terms of psychiatric development, they are developing from the nature of children into adults.

The results of field data collection obtained the identity of teenage respondents in North Toraja as much as 115 (100%) young female respondents domiciled in the North Toraja region.

Referring to the data [Table 1](#), based on the number of respondents as many as 115 adolescents, most aged between 17 and 20 years old as many as 65 (56.52%). The rest are spread across the 21–24 age group by 32 (27.83%), and the rest are over 24 years old 18 (15.65%).

The age group of adolescence is the transition period between childhood and adulthood. Adolescents at this stage have not reached mental and social maturity, so adolescents have to face many conflicting emotional and social pressures. Teenagers will

Table 2
Frequency distribution of knowledge levels about adolescent reproductive health.

No.	Overview of youth knowledge	Frequency	Percentage (%)
1	Good	38	33.04
2	Enough	61	53.05
3	Less	16	13.91
	Total	115	100

experience rapid physical changes as they enter puberty. One of these physical changes is the ability to perform the reproductive process. But many phenomena show some adolescents do not yet know and understand about reproductive health, for example, about menstruation and the ones occur of pregnancy. Parents in rural areas still consider that talking about reproduction with teenagers is still considered taboo. The source of adolescent reproductive health information is not yet properly known as the correct and effective source.

Adolescents from rural areas need to be informed about reproductive health, in addition to getting them clarity on their reproductive tools properly, can also help them get to know themselves so that adolescents can be more responsible for their reproductive health.

Cases surrounding adolescent reproduction are now on the rise, due to adolescent incomprehension of various aspects of reproduction-related to themselves. Improvement of the quality of adolescent reproductive health can be made by paying attention to health communication problems. Adolescents' concerns about sexuality and reproductive health have become increasingly complex and alarming. Problems that occur in adolescent reproductive health can be sex before marriage, dropout due to pregnancy, irresponsible partner, use of contraceptives, abortion, infected with HIV/AIDS, sexually transmitted diseases and the use of illegal drugs.

Then to find out the level of adolescent knowledge about reproductive health, the results of the study summarize in the form of [Table 2](#).

Based on the data table above shows that the majority of adolescent respondents in the North Toraja region know enough about environmental health as much as 61 (53.05%) Respondents. This compares to the picture of good knowledge, and less that is, 38 (33.04%) each 16 (13,915). The idea of knowledge about adolescent reproductive health includes the knowledge of a health condition that concerns the system, functions and reproductive processes that adolescents have.

Healthy understanding here does mean not only disease-free or disability-free but also mentally and socioculturally healthy. Youth knowledge is still low because it is influenced by information received from both communication media and families, school environment and surrounding communities.

Adolescents' knowledge of reproductive health can be obtained through health education, counselling, experience, reading material about reproductive health through print media such as magazines, leaflets, books on health or electronic media and education both in school and in the family. Most human knowledge is obtained through the eyes and ears. Factors affecting experience, level of education, beliefs, facilities, income, socio-cultural.

This lack of adolescent knowledge may be due to teenagers being less informed about reproductive health, especially about the care and care of reproductive organs, most adolescents only get information from peers whose own perceptions are not necessarily the truth. To overcome this, efforts can be made to increase knowledge, especially about the understanding of reproductive health, how to maintain and care for reproductive organs, the fertile period can read books on reproductive health knowledge, follow and seek information from health counsellors and digital or online media that are currently very popular with teenagers.

Table 3
Distribution of the spread of adolescent reproductive health acquisition.

No.	Overview of youth knowledge	Frequency	Percentage (%)
1	Books/magazines	66	57.39
2	Website	32	27.83
3	Social media	17	14.78
	Total	115	100

Limited knowledge of female reproduction can lead adolescents toward risky behaviors. The teenager's assumption that having sex only once is not possible in pregnancy, is a mirror that she does not yet understand the process of pregnancy. The consequences of pre-nuptial sex do not stop at the issue of unwanted pregnancy (KTD) only. The psychic problems that often accompany it are guilt, shame, depression, even wanting to kill yourself. In addition, there is often a strong push to perform abortions. This is what often encourages teenagers to have abortions on their own, namely with self-treatment that has a much higher risk than abortion with the help of medical personnel BKKBN (2010).

Furthermore, for a variety of media preferences generally, ask media users to sort which media they like the most. In general, the word preference is defined as the main choice, so the word media preference can be interpreted as the media of the main choice. The use of the word media preference is commonly used in looking at the use of mass media by adolescents. The medium of communication today is quite numerous and varied so that the public determines the most preferred media search options to use according to its purpose. In the context of this study, based on the results of the study processed details of the preference of the search of communication media to obtain reproductive health information as below ([Table 3](#)).

Based on the recapitulation of the data collection results as shown in [Table 3](#), it shows that most respondents chose the type of print media of Books and Magazines as the preferred source of obtaining reproductive health information. This is based on a calculation of 66 (57.39%), and then the Website of 32 (27.83%) and last was social media at 17 (14.78%).

Adolescent reproductive health issues are allegedly related to information the teen obtains through the media. In general, teenagers use the media of books and magazines as a source of information than other media, because it provides a more interesting picture of the sexual desires and needs of adolescents. Users of such media can be a key component of health interventions and can facilitate risky behaviors.⁹

The role of the media in shaping adolescent behavior is huge. Mass media is an important dimension of life that may have special meaning during adolescence, especially for risky sexual behavior.¹⁰ The acquisition of information through the media may have an impact on youth attitudes and behaviors. The media's impact on adolescent attitudes and behaviors can have a positive and negative impact. Media that have the right information content will have a positive impact on teenagers and vice versa. With this era of information, access to media gradually became commonplace in the daily lives of teenagers and young adults in both the West and East Countries.¹¹

Conclusion

Print communication media Books and Magazines as a source of preference for obtaining reproductive health information. This is based on the calculation of 57.39%, and then the Website by 27.83% and the last is social media by 14.78%.

Conflicts of interests

The authors declare that they have no conflict of interest.

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